PTC/SB/06 (08-03)

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Substitute for Farm PTO-875											673
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL E	NTITY	<b>O</b> R	OTHER SMALL	
FOR NUMBER FILED NUMBER EXTRA					ſ	RATE	FEE		RATE	FEE	
BASIC FEE (IF GRO )					Ī		\$	OR		.790.	
TOTA	LOLANS	<del> </del>	minus 20 • · K F			ı	x3=		OR	x 5•	
NOE	FR 1.16(c)) PENDENT CLADA	y		+++		l	**		<b>C</b> R	x 5 •	
(37 CFR 1.16(b)) minus 3 •									OR .	+5 =	V
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							78		OR.	TOTAL	PAID
off the difference in column 1 is less than zero, enter 'O' in column 2. TOTAL OR TOTAL											
CLAIMS AS AMENDED - PART II											
2	<b> </b> 22 05	(Column 1)		(Column 2)	(Column 3)	_	SMALL E	NTITY	OR	. SMALL	
AMENDMENT	1	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	PONAL PO	•	RATE	ADDI- TIONAL FEE
纟	Total	AMENDMENT	Minus	PAID FOR	•		x3		1	x \$a	
ğ	Independent	-012	Minus	- 2	• -	H			OR	<b></b>	
Ψ.	(D) (CPR 1.18(nd)		1				x 5e		OR		
		TION OF MULTIPLE	DEPENDE	NT CLANA DT CF	R 1,16(4)		TCTAL			TOTAL	
5/20/06							ADDITEE	L	OR	ADDIL FEE	
2		(Column 1)		(Column 2)	(Column 3)				3		
2		CLAIMS REMAINING AFTER		HIGHEST NRAMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
힣	Total	AMENDAGMT	Minus	" 21	• 3		X 8		OR	x = 50.	150.00
ğ	(ST CFR 1.19bg) Independent (ST CFR 1.19bg)	• 2	Minus	- 3	• 0	1	×3 -		OR	x 1	
AMENDMENT	FRIST PRESENTATION OF MILITIPLE DEPENDENT CLAM (37 CFR 1.18(5))					١	+3 -		OR	+1=	
POST PRESSITATION OF MEATURE DE PARCET COLOR						3	-TOTAL ADD'L FEE		1 <sub>08</sub>	TOTAL ADD'L FEE	150.00
	$N \cdot \mathcal{E}$	á					,		4		
<u>_</u>		(Cotumn 1)	,	(Column 2) HIGHEST	(Column 3)	1			1	RATE	ADDI-
ENTE	4-5-01	REMAINING AFITER AMENDMENT		MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL FEE			TIONAL FEE
IΣ	Total cu cen 1.16(p)	. 14	Minus	-29		ł	x 5e		OR	× 5 =	<del>                                     </del>
END	Independent proFR 1.1009	. 2	Minus	- 3	1/		×1		OR.	×3	<b></b>
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (DF OFR 1.18M3)						+1_=		OR		<b>\</b>
H						-	TOTAL ADD'L FEE		OR	ADDIL FEE	
	• If the entry in o	edumn 1 is less th	en the ent	y in column 2, wr	to "O" in column	3.			-		
* If the emby in column 1 is less than the entry in column 2, write "O" in column 3.  If the Trighest Number Previously Paid For it 1143 SPACE is less than 20, enter "20".  If the Trighest Number Previously Paid For "bit Trigs SPACE is less than 3, enter "7".  The Trighest Number Previously Paid For "It Trigs SPACE is less than 3, enter "7".  The Trighest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1.											

The "Righest Number Proviously Paid For" (Total or Independent) is the legnest number bound in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is sequend to obtain or retain a benefit by the public which is to bis (and by the This collection of Information is required by 35 CFR 1.16. The Information is sequend to obtain or retain a benefit by the public which is to bis (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, useful by the USPTO. Three will very depending upon the Individual cose. Any comments including generating preparing, and submitting the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent on the emount of time you require to complete this form antitir suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS and Trademark Office, U.S. Department for Patenta, P.O. Box 1450, Alexandria, VA 22313-1450.